

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION**

In re:

Nedranae Y Hunt

Debtor(s)

Case No. 15 B 30993

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**CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT**

Marilyn O. Marshall, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 09/10/2015.
- 2) The plan was confirmed on 11/18/2015.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on 02/16/2017.
- 5) The case was Dismissed on 04/03/2017.
- 6) Number of months from filing to last payment: 16.
- 7) Number of months case was pending: 26.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: NA.
- 10) Amount of unsecured claims discharged without payment: \$0.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

**Receipts:**

Total paid by or on behalf of the debtor	\$5,205.00
Less amount refunded to debtor	\$0.00

**NET RECEIPTS: \$5,205.00**

**Expenses of Administration:**

Attorney's Fees Paid Through the Plan	\$3,288.20
Court Costs	\$0.00
Trustee Expenses & Compensation	\$216.67
Other	\$0.00

**TOTAL EXPENSES OF ADMINISTRATION: \$3,504.87**

Attorney fees paid and disclosed by debtor: \$300.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Advocate Christ Medical Center	Unsecured	6,252.00	NA	NA	0.00	0.00
Advocate Christ Medical Center	Unsecured	1,089.00	NA	NA	0.00	0.00
Advocate Medical Group	Unsecured	383.00	NA	NA	0.00	0.00
Advocate Medical Group	Unsecured	210.00	NA	NA	0.00	0.00
Advocate Medical Group	Unsecured	0.00	NA	NA	0.00	0.00
Advocate South Suburban Hospital	Unsecured	75.00	NA	NA	0.00	0.00
Americash Loans	Unsecured	1,228.00	NA	NA	0.00	0.00
AT&T Mobility II LLC	Unsecured	0.00	1,462.67	1,462.67	0.00	0.00
BMO Harris Bank	Unsecured	600.00	NA	NA	0.00	0.00
BMO Harris Bank	Unsecured	0.00	NA	NA	0.00	0.00
Buds Ambulance Service	Unsecured	655.00	NA	NA	0.00	0.00
Capital One Bank	Unsecured	991.00	990.75	990.75	0.00	0.00
Century Ears, Nose, & Throat	Unsecured	307.00	NA	NA	0.00	0.00
Christ Hospital & Medical Center	Unsecured	3,881.00	NA	NA	0.00	0.00
City of Chicago	Unsecured	122.00	NA	NA	0.00	0.00
City of Chicago Department of Revenue	Unsecured	120.00	122.00	122.00	0.00	0.00
Comcast	Unsecured	423.00	NA	NA	0.00	0.00
ComEd	Unsecured	462.00	NA	NA	0.00	0.00
Commonwealth Edison Company	Unsecured	452.00	389.49	389.49	0.00	0.00
Credit Protection Assoc.	Unsecured	451.00	NA	NA	0.00	0.00
Diversified Consultant	Unsecured	632.00	NA	NA	0.00	0.00
Enhanced Recovery	Unsecured	768.00	NA	NA	0.00	0.00
ER Solutions/Convergent Outsourcing, IN	Unsecured	410.00	NA	NA	0.00	0.00
Exeter Finance Corporation	Secured	18,280.00	19,875.86	7,200.00	1,296.44	403.69
Exeter Finance Corporation	Unsecured	NA	12,675.86	12,675.86	0.00	0.00
Harvard Collection	Unsecured	674.00	NA	NA	0.00	0.00
Illinois Bell Telephone Company	Unsecured	1,462.00	1,480.97	1,480.97	0.00	0.00
Illinois Dept of Revenue 0414	Unsecured	0.00	83.70	83.70	0.00	0.00
Illinois Dept of Revenue 0414	Priority	593.00	543.52	543.52	0.00	0.00
L.J. Ross Associates	Unsecured	445.00	NA	NA	0.00	0.00
Mcsi Inc	Unsecured	250.00	NA	NA	0.00	0.00

**Scheduled Creditors:**

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
Midwest Anesthesiologists LTD	Unsecured	93.00	NA	NA	0.00	0.00
Nicor Gas	Unsecured	0.00	369.87	369.87	0.00	0.00
Northland Group	Unsecured	366.00	NA	NA	0.00	0.00
Northland Group	Unsecured	79.00	NA	NA	0.00	0.00
Peoples Gas	Unsecured	433.00	NA	NA	0.00	0.00
Radiology Imaging Consultants	Unsecured	946.00	NA	NA	0.00	0.00
Radiology Imaging Consultants	Unsecured	754.00	NA	NA	0.00	0.00
Select Card/5th3rd	Unsecured	0.00	NA	NA	0.00	0.00
Sharon A. Malinowski, D.D.S	Unsecured	20.00	NA	NA	0.00	0.00

**Summary of Disbursements to Creditors:**

	<u>Claim Allowed</u>	<u>Principal Paid</u>	<u>Interest Paid</u>
<b>Secured Payments:</b>			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$0.00	\$0.00	\$0.00
Debt Secured by Vehicle	\$7,200.00	\$1,296.44	\$403.69
All Other Secured	\$0.00	\$0.00	\$0.00
<b>TOTAL SECURED:</b>	<b>\$7,200.00</b>	<b>\$1,296.44</b>	<b>\$403.69</b>
<b>Priority Unsecured Payments:</b>			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$543.52	\$0.00	\$0.00
<b>TOTAL PRIORITY:</b>	<b>\$543.52</b>	<b>\$0.00</b>	<b>\$0.00</b>
<b>GENERAL UNSECURED PAYMENTS:</b>	<b>\$17,575.31</b>	<b>\$0.00</b>	<b>\$0.00</b>

**Disbursements:**

Expenses of Administration	<u>\$3,504.87</u>	
Disbursements to Creditors	<u>\$1,700.13</u>	
<b>TOTAL DISBURSEMENTS :</b>		<b><u>\$5,205.00</u></b>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 10/30/2017

By: /s/ Marilyn O. Marshall

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Trustee

**STATEMENT:** This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.